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040854 7590 08/07/2006
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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/500,603	06/30/2004	Honami Ousawa	NIS-15538	4750

TITLE OF INVENTION: COUNTERROTATING AXIAL BLOWER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	\$1400	11/07/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
HANAN, DEVIN J	3745	415-068000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Rankin, Hill, Porter & Clark LLP
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		2 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE
 SANYO DENKI CO., LTD.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)
 Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:	<input type="checkbox"/> Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)
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Authorized Signature /David E. Spaw/ Date October 28, 2006
 Typed or printed name David E. Spaw Registration No. 34732

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